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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for	LaDonna First name	First name
	example, your driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meetin with the trustee.	Daniels-Stephens  g Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5101	

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Debtor 1 Daniels-Stephens, LaDonna

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names		■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs		
5.	Where you live	4718 Oakridge Ave Oak Forest, IL 60452-4126  Number, Street, City, State & ZIP Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Daniels-Stephens, LaDonna

Case number (if known)

	7. The chapter of the Check one. (For a brief description of each, see <i>Notice Required by 11 U.S.C.</i> § 342(b) for a second of the support of						. § 342(b) for Individual	ls Filing for Bankruptcy (Form
	Bankruptcy Code you are choosing to file under							
	· ·	☐ Chap						
		☐ Chap						
		☐ Chap						
		■ Chap	ter 13					
8.	How you will pay the fee	ab	out how you	entire fee when I file my petition. Please check with the clerk's office in your local court for more details may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order is submitting your payment on your behalf, your attorney may pay with a credit card or check with a ress.				
				the fee in installments. If your stallments (Official Form 103		this option, sign a	and attach the <i>Applicatio</i>	on for Individuals to Pay The
			_	t my fee be waived (You may	,	his option only if y	ou are filing for Chapter	r 7. By law, a judge may, but
				o, waive your fee, and may do see and you are unable to pay the				
				chapter 7 Filing Fee Waived (C				a mast mi out the Application
9. Have you filed for Sankruptcy within the last 8 years? No.								
	o years?	Tes.	District		When		Case number	
			DISTRICT	Northern District of	_ wileli		Case Hullibel	
			District	Illinois	When	7/01/11	Case number	11-27691
			District		When		Case number	
10.	Are any bankruptcy cases	■ No						
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		_ When		Case number, if	known
11.	Do you rent your	■ No.	Go to li	ne 12.				
	residence?	☐ Yes.	Has voi	ur landlord obtained an eviction	n iudamen	t against vou and	do you want to stay in y	our residence?
		<b>_</b> 103.		No. Go to line 12.	. ,	gamer you and	you main to otay in y	,
				Yes. Fill out <i>Initial Statement</i>	About an	Eviction Judamen	nt Against You (Form 10	01A) and file it with this

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Debtor 1 Daniels-Stephens, LaDonna

Case number (if known)

Part	Report About Any Bus	sinesses \	You Own as a Sole Proprietor					
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	S. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City, State & ZIP Code					
	to this petition.		Check the appropriate box to describe your business:					
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))					
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))					
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))					
			□ None of the above					
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach y operations, cash-flow statement, and federal income tax return or if any of these you a small business U.S.C. 1116(1)(B).		filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate it. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 116(1)(B).						
	debtor?  For a definition of small	■ No.	I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Part	t 4: Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention					
14.	Do you own or have any property that poses or is	■ No.						
	alleged to pose a threat of imminent and identifiable	☐ Yes.	What is the hazard?					
	hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?  Number, Street, City, State & Zip Code					

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Debtor 1 Daniels-Stephens, LaDonna

Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Daniels-Stephens, LaDonna Document Page 6 of 52 Case number (if known)

Par	6: Answer These Question	ons for Rep	orting Purposes					
16.	What kind of debts do you have?			consumer debts? Consumer debts are defreonal, family, or household purpose."	fined in 11 U.S.C.§ 101(8) as "incurred by an			
		1	☐ No. Go to line 16b.					
		I	Yes. Go to line 17.					
			<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
		1	□ No. Go to line 16c. □ Yes. Go to line 17.					
		1						
		16c.	State the type of debts you	owe that are not consumer debts or business	s debts			
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any exempt prope able to distribute to unsecured creditors?	erty is excluded and administrative expenses are			
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	I	□ No					
		I	□ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,000	☐ 25,001-50,000 ☐ 50,001-100,000			
		☐ 100-199 ☐ 200-999		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to be worth?	□ \$100,00	0,000 I - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	\$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion			
Part	:7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		case can re	nd making a false statement esult in fines up to \$250,000 nna Daniels-Stephens	0, or imprisonment for up to 20 years, or both	property by fraud in connection with a bankruptcy n. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
			Daniels-Stephens	Signature of Deb	tor 2			
		Executed of	March 22, 2017 MM / DD / YYYY	Executed on M	IM / DD / YYYY			

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Debtor 1 Daniels-Stephens, LaDonna

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ April Senter	Date	March 22, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Ameil Conton		
April Senter		
Printed name		
Senter Legal Services, Ltd.		
Firm name		
22511 Jackson Ct # 2D		
Richton Park, IL 60471-2109		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	senterlegal@gmail.com
Bar number & State		
Dai Hallibol & Olato		

		Docume	FILE Paye 0 01 32	
Fill in this infor	mation to identify your	case:	Ŭ	
Debtor 1	LaDonna Daniels	s-Stephens		
	First Name	Middle Name	Last Name	<del></del> )
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	
Case number				☐ Check if this is an
(				amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/1!

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	23,546.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	23,546.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	31,133.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	13,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	107,738.00
	Your total liabilities	\$	151,871.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	4,991.18
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,447.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	her schedul	les.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.	ersonal, fan	nily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bo	x and subn	nit this form to the

court with your other schedules.

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Debtor 1 Daniels-Stephens, LaDonna

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,691.11 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	13,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	13,000.00

Case 17-09043 Doc 1 Filed 03/22/17 Entered 03/22/17 12:46:43 Desc Main Document Page 10 of 52 Fill in this information to identify your case and this filing: Debtor 1 LaDonna Daniels-Stephens Last Name Middle Name Debtor 2 Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No Go to Part 2  $\square$  Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **Toyota** 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Camry Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2013 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 76584 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$10,596.00 \$10,596.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chevrolet 32 Make Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Tahoe** Creditors Who Have Claims Secured by Property. Debtor 1 only Model 2004 Debtor 2 only Current value of the Current value of the Approximate mileage: 189000 entire property? Debtor 1 and Debtor 2 only portion you own? Other information: At least one of the debtors and another \$2,145,00 \$2.145.00 ☐ Check if this is community property (see instructions)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories *Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

■ No

☐ Yes

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Del	btor 1	Daniels-Step	ohens, LaDonna	Document	Case number (if kn	nown)
					m Part 2, including any entries for pag	ges \$12,741.00
Par	t 3: Des	scribe Your Perso	nal and Household Items			
			egal or equitable interest	in any of the following	ng items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		old goods and fues: Major appliand	urnishings ces, furniture, linens, china,	kitchenware		
ı	Yes.	Describe				
			Miscellaneous Hous	sehold Items & Fu	rniture	\$1,000.00
	■ No	es: Televisions an	nd radios; audio, video, stere phones, cameras, media p	, , , , , ,	ent; computers, printers, scanners; music	collections; electronic devices
ı	Example No		figurines; paintings, prints, nemorabilia, collectibles	or other artwork; book	s, pictures, or other art objects; stamp, co	in, or baseball card collections; other
ı	Example No	ent for sports an es: Sports, photog instruments		hobby equipment; bic	ycles, pool tables, golf clubs, skis; canoes	s and kayaks; carpentry tools; musical
	■ No		s, shotguns, ammunition, a	nd related equipment		
[	□ No	oles: Everyday clo	thes, furs, leather coats, de	esigner wear, shoes, a	ccessories	
	Yes.	Describe	Clathing Chas			\$500.00
			Clothing Shoe			\$500.00
	Jewelry Examp  ■ No		elry, costume jewelry, enga	agement rings, weddin	g rings, heirloom jewelry, watches, gems,	gold, silver

☐ Yes. Describe.....

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here ......

\$1,500.00

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Case number (if known) Document Debtor 1 Daniels-Stephens, LaDonna Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Northside Community Federal Credit Union** \$85.00 **Checking Account** 17.1. **Northside Community Federal Credit Union** \$120.00 **Savings Account** 172 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: **Pension Plan** \$9,000.00 **Advocate Retirement Services** 401(k) or Similar Plan \$100.00 **Advocate Retirement Services** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. ..... Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

		Case 17	7-09043	Doc 1	Filed 03/22/17		Desc Main
De	ebtor 1	Daniels-S	tephens, La	aDonna	Document	Page 13 of 52  Case number (if known)	
	☐ Yes		Institution na	me and descr	iption. Separately file the	records of any interests.11 U.S.C. § 521(c):	
25.	■ No		future interes		ty (other than anything	g listed in line 1), and rights or powers exerc	isable for your benefit
	Example No	les: Internet do		websites, pro	s, and other intellectua oceeds from royalties and		
27.	Example No ■	les: Building p	s, and other germits, exclus	ive licenses, o		oldings, liquor licenses, professional licenses	
M	oney or p	property owe	d to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
	■ No	unds owed to		out them, inclu	uding whether you alread	y filed the returns and the tax years	
29.	■ No	les: Past due	or lump sum a		ısal support, child suppo	ort, maintenance, divorce settlement, property s	settlement
30.	Example  ■ No	<i>les:</i> Unpaid wa	ans you made	/ insurance pa		ts, sick pay, vacation pay, workers' compensati	on, Social Security benefits;
31.		<b>s in insuranc</b> les: Health, dis		insurance; he	alth savings account (HS	SA); credit, homeowner's, or renter's insurance	
	☐ Yes. N	Name the insu		ny of each poli pany name:	icy and list its value.	Beneficiary:	Surrender or refund value:
32.	If you a died.		ary of a living		someone who has diec proceeds from a life insu	d rance policy, or are currently entitled to receive p	property because someone has
33.					ou have filed a lawsuit surance claims, or rights	or made a demand for payment to sue	
		Describe eacl					
34.	■ No	ontingent and Describe eacl	·	ed claims of e	every nature, including	counterclaims of the debtor and rights to s	et off claims
35.	Any fina	ancial assets	you did not	already list			
	■ No	Give specific i					

Debto	Daniels-Stephens, LaDonna	Case number (if known)	
	Add the dollar value of all of your entries from Part 4, includir Part 4. Write that number here		\$9,305.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	erest In. List any real estate in Part 1.	
37. <b>Do</b>	you own or have any legal or equitable interest in any business-rela	ted property?	
■ N	o. Go to Part 6.		
ПΥ	es. Go to line 38.		
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property Yo If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interest In.	
	you own or have any legal or equitable interest in any farm-	or commercial fishing-related property?	
	No. Go to Part 7.		
	Yes. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above	
	you have other property of any kind you did not already list	?	
	xamples: Season tickets, country club membership		
	No Yes. Give specific information		
	res. Give specific information		
54. <i>A</i>	add the dollar value of all of your entries from Part 7. Write th	at number here	\$0.00
Part 8:	List the Totals of Each Part of this Form	'	
	Elot the Fotale of Each Fait of this Form		
55. <b>F</b>	Part 1: Total real estate, line 2		\$0.00
56. <b>F</b>	Part 2: Total vehicles, line 5	\$12,741.00	
57. <b>F</b>	Part 3: Total personal and household items, line 15	\$1,500.00	
58. <b>F</b>	Part 4: Total financial assets, line 36	\$9,305.00	
59. <b>F</b>	Part 5: Total business-related property, line 45	\$0.00	
60. <b>F</b>	Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. <b>F</b>	Part 7: Total other property not listed, line 54	+ \$0.00	

\$23,546.00

Copy personal property total

\$23,546.00

\$23,546.00

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

Fill in this infor	mation to identify your	case:	111 1 age 10 01 02		
Debtor 1	LaDonna Daniels	s-Stephens			
	First Name	Middle Name	Last Name	)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVIS	ION	
Case number					
(if known)					Check if this is a
					amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Part 1:	Identify	the	<b>Property</b>	You	Claim as	Exemp
--	---------	----------	-----	-----------------	-----	----------	-------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B				
Chevrolet Tahoe 2004 189000 Line from Schedule A/B: 3.2	\$2,145.00	•	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)	
Miscellaneous Household Items & Furniture Line from Schedule A/B 6.1	\$1,000.00	■	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Clothing Shoe Line from Schedule A/B: 11.1	\$500.00	■	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)	
Northside Community Federal Credit Union Line from Schedule A/B: 17.1	\$85.00	□ ■	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Northside Community Federal Credit Union Line from Schedule A/B: 17.2	\$120.00	■	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption				
		Copy the value from Schedule A/B	Check only one box for each exemption.					
	Advocate Retirement Services	\$9,000.00		735 ILCS 5/12-1006				
	Line from Schedule A/B: 21.1		■ 100% of fair market value, up to any applicable statutory limit					
	Advocate Retirement Services	\$100.00		735 ILCS 5/12-1006				
	Line from Schedule A/B: 21.2		■ 100% of fair market value, up to any applicable statutory limit					
3.	Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)							
	No							
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?							
	□ No							
	☐ Yes							

Case 17-09043 Doc 1 Filed 03/22/17 Entered 03/22/17 12:46:43 Desc Main Document Page 17 of 52 Fill in this information to identify your case: Debtor 1 LaDonna Daniels-Stephens Last Name Middle Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured Do not deduct the portion much as possible, list the claims in alphabetical order according to the creditor 's name. that supports this value of collateral. claim If any **Exeter Finance Corp** Describe the property that secures the claim: \$21,991.00 \$10,596.00 \$11,395.00 Creditor's Name 2013 Toyota Camry As of the date you file, the claim is: Check all that PO Box 166008 Irving, TX 75016-6008 ☐ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred 2015-01 Last 4 digits of account number 1001 **First National Bank** \$0.00 22 Describe the property that secures the claim: \$477.00 \$477.00 Attn: FNN Legal Dept 1620 Dodge Dt MSC As of the date you file, the claim is: Check all that **CODE3290 Omaha, NE 68130** ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured Debtor 1 only

Debtor 2 only

☐ Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this claim relates to a

community debt Date debt was incurred

car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

Judgment lien from a lawsuit

Other (including a right to offset)

Last 4 digits of account number

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Debtor 1 LaDonna Daniels-Steph	Case number (f know)						
First Name Middle Na							
2.3 Hertg Accpt	Describe the property that secures the claim	\$8,665.00	\$2,145.00	\$6,520.00			
Creditor's Name	2004 Chevrolet Tahoe						
1420 S Michigan St South Bend, IN 46613-2214	As of the date you file, the claim is: Check all tapply.  ☐ Contingent	hat					
Number, Street, City, State & Zip Code	☐ Unliquidated						
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.						
■ Debtor 1 only ■ Debtor 2 only	An agreement you made (such as mortgage car loan)	or secured					
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)					
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	•					
☐ Check if this claim relates to a community debt	Other (including a right to offset)						
Date debt was incurred 2012-02-03	Last 4 digits of account number 8	001					
	Add the dollar value of your entries in Column A on this page. Write that number here:  ### \$31,133.00  ### Bigs						
Use this page only if you have others to be trying to collect from you for a debt you ov	e notified about your bankruptcy for a debt tha ve to someone else, list the creditor in Part 1, you listed in Part 1, list the additional creditor	and then list the collection agenc	y here. Similarly, if you	ı have more			
Name, Number, Street, City, State & Z Exeter Finance Corp PO Box 166097 Irving, TX 75016-6097		On which line in Part 1 did you enter ast 4 digits of account number					
Name, Number, Street, City, State & Z Fnb Omaha PO Box 3412 Omaha, NE 68103-0412		On which line in Part 1 did you enter					

			Docu	ment	Page 19 of !	52	1	
Fil	l in this informat	tion to identify your c	ase:					
De	ebtor 1	LaDonna Daniels	-Stephens					
		First Name	Middle Name		Last Name	_		
	ebtor 2	First Name	Middle Name		Last Name			
(Sp	ouse if, filing)	First Name	Middle Name		Last Name			
Un	ited States Bankı	ruptcy Court for the:	NORTHERN DISTI	RICT OF ILLI	NOIS, EASTERN [	DIVISION		
Ca	ise number							
	nown)						☐ Check	if this is an
							amend	ed filing
∩f	ficial Form	106E/E						
		: Creditors W	ho Havo IIne	ocured (	laime			12/15
		ccurate as possible. Use				r creditors with NONI	PRIORITY claims. Lis	
Sch D: 0 the	edule G: Executor Creditors Who Hav	ets or unexpired leases y Contracts and Unexpi e Claims Secured by Pr e to this page. If you hav n).	red Leases (Official Fo operty. If more space i	orm 106G). Do s needed, cop	not include any cred y the Part you need,	ditors with partially so, fill it out, number the	ecured claims that ar e entries in the boxes	e listed in Schedule on the left. Attach
Pa	rt 1: List All o	of Your PRIORITY Un	secured Claims					
1.		have priority unsecured	I claims against you?					
	☐ No. Go to Part	2.						
	Yes.							
2.	identify what type possible, list the c	riority unsecured claims of claim it is. If a claim ha laims in alphabetical orde e creditor holds a particul	s both priority and nonport r according to the credite	riority amounts, or 's name. If yo	list that claim here a ou have more than tw	nd show both priority a	nd nonpriority amounts	s. As much as
	(For an explanation	n of each type of claim, s	ee the instructions for th	is form in the in	struction booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1	Internal R	Revenue Service	Last 4 dig	its of account	number	\$13,000.00	\$5,600.00	\$7,400.00
	PO Box 1	port-Stop 813-G 45566	When was	s the debt incu	urred?		_	
		ti, OH 45250-5566 et City State Zlp Code	As of the	date vou file. t	t <b>he claim is:</b> Check a	all that apply		
		ne debt? Check one.	☐ Contine		ine ciaim is. Oncor a	л пасарну		
	■ Debtor 1 only	,	☐ Unliqui					
	Debtor 2 only							
	☐ Debtor 1 and			eu RIORITY unse	cured claim:			
	_		П-	stic support obli				
		of the debtors and anothe	_		_			
		claim is for a commun	_		er debts you owe the ersonal injury while yo	•		
	Is the claim sub	nject to onset?	_					
	☐ Yes		☐ Other.					
_								
_		of Your NONPRIORIT						
3.	_	have nonpriority unsec						
	☐ No. You have  In the second of the secon	nothing to report in this pa	rt. Submit this form to th	ne court with yo	our other schedules.			
	Yes.							
4.	unsecured claim, l	onpriority unsecured classifies the creditor separately nolds a particular claim, lie	for each claim. For each	h claim listed, id	dentify what type of cl	laim it is. Do not list cla	ims already included in	n Part 1. If more

Total claim

Debt	Daniels-Stephens, LaDonna	Case number (f know)	
4.1	05027130	Last 4 digits of account number 0546	\$14,358.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	Li Tes	Other. Specify	
4.2	05027130	Last 4 digits of account number 1205	\$13,100.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The or and that you may and or an in an appropriate and approp	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	05027130	Last 4 digits of account number 1410	\$7.396.00
	Nonpriority Creditor's Name	<del></del>	<b>V</b> 1,000.00
		When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Case number (f know)

Debtor 1 Daniels-Stephens, LaDonna \$150.00 4.4 **Accurate Dentistry** Last 4 digits of account number 6001 Nonpriority Creditor's Name When was the debt incurred? 2012-01-04 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.5 **AIU - ONLINE** Last 4 digits of account number 5313 \$1,388.00 Nonpriority Creditor's Name When was the debt incurred? 2016-04 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.6 **All Smiles Orthodontics** Last 4 digits of account number 7518 \$4,354.00 Nonpriority Creditor's Name When was the debt incurred? 2013-08 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debte	Daniels-Stephens, LaDonna		Case number (if know)	
4.7	At T	Last 4 digits of account number	7364	\$370.00
	Nonpriority Creditor's Name	When was the debt incurred?	2016-03	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.8	COMCAST	Last 4 digits of account number	8973	\$1,057.00
	Nonpriority Creditor's Name	When was the debt incurred?	2016-09-20	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
	COOK COUNTY, ILLINOIS - 1ST			
4.9	MUNICIPAL DI Nonpriority Creditor's Name	Last 4 digits of account number		\$6,544.00
	Nonpriority Greator's Name	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	an plane, and other circiles delte	
	No	Debts to pension or profit-sharir	ng pians, and other similar debts	
	☐ Yes	Other Specify		

Debto	Case 17-09043 Doc 1	Filed 03/22/17	Main
	Daniels-Stephens, LaDonna COOK COUNTY, ILLINOIS - 6TH		40 705 00
4.10	MUNICIPAL D1  Nonpriority Creditor's Name	Last 4 digits of account number 2404	\$3,795.00
	Nonpriority Greditor's Name	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
	COOK LAW MAGISTRATE -		
4.11	CHICAGO	Last 4 digits of account number 5822	\$5,750.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.12	COOK LAW MAGISTRATE - MARKHAM	Last 4 digits of account number 0546	\$14,358.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	

■ No ☐ Yes

Other. Specify

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Depto	Daniels-Stephens, Labonna		Case number (it know)	
4.13	Ds Waters of America Inc  Nonpriority Creditor's Name	Last 4 digits of account number	1504	\$573.00
	Notificially Greditor's Name	When was the debt incurred?	2012-03-19	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debts	
	Yes	_		
	Li les	Other. Specify		
4.14	Fed Loan Servicing	Last 4 digits of account number	0002	\$8,319.00
	Nonpriority Creditor's Name	When was the debt incurred?	2011-10	
	PO Box 69184 Harrisburg, PA 17106-9184 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.15	Fed Loan Servicing	Last 4 digits of account number	0006	\$3,883.00
	Nonpriority Creditor's Name	When was the debt incurred?	2013-01	
	PO Box 69184	Whom was the assemble to a	2013-01	
	Harrisburg, PA 17106-9184  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	$\square$ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other, Specify	O 1	
	<b>□</b> 103	Utner, Specify		

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Debto	Daniels-Stephens, LaDonna		Case number (f know)	
4.16	Fed Loan Servicing	Last 4 digits of account number	0001	\$3,810.00
	Nonpriority Creditor's Name	When was the debt incurred?	2011-10	
	PO Box 69184 Harrisburg, PA 17106-9184		2011 10	
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify		
4.17	Fed Loan Servicing	Last 4 digits of account number	0008	\$3,334.00
	Nonpriority Creditor's Name	_		, c, c c
	DO Box 00404	When was the debt incurred?	2014-09	
	PO Box 69184 Harrisburg, PA 17106-9184			
	Number Street City State Zlp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.18	Fed Loan Servicing	Last 4 digits of account number	0004	\$2,693.00
	Nonpriority Creditor's Name	- When we the debt in sumed 2	2040.05	
	PO Box 69184	When was the debt incurred?	2012-05	
	Harrisburg, PA 17106-9184			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	-	
	No	Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	Other, Specify		

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Deptor	Daniels-Stephens, Labonna		Case number (if know)	
4.19	Fed Loan Servicing	Last 4 digits of account number	0005	\$1,904.00
	Nonpriority Creditor's Name	When was the debt incurred?	2013-01	
	PO Box 69184		2010-01	
	Harrisburg, PA 17106-9184	_		
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	■ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	_		
	165	Other. Specify		
4.20	Fed Loan Servicing	Last 4 digits of account number	0007	\$1,850.00
	Nonpriority Creditor's Name	When was the debt incurred?	2014-09	
	PO Box 69184	when was the debt incurred?	2014-09	
	Harrisburg, PA 17106-9184			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.21	Fed Loan Servicing	Last 4 digits of account number	0003	\$1,270.00
	Nonpriority Creditor's Name			ψ1, <u>210100</u>
	DO Dov 00404	When was the debt incurred?	2012-05	
	PO Box 69184 Harrisburg, PA 17106-9184			
	Number Street City State Zlp Code	. As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other, Specify		

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Debto	Daniels-Stephens, LaDonna		Case number (f know)	
1.22	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	6949	\$461.00
	Nonpriority Creditor's Name	When was the debt incurred?	2015-03	
	601 S Minneaplois Ave			
	Dious FDalls, SD 57104		Charle all that and a	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply	
	Debtor 1 only	O combination		
	Debtor 2 only	☐ Contingent		
	Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		Student loans	a oldiiii.	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of alverse that you are not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
23	Gateway Holdings Group	Last 4 digits of account number	7885	\$710.00
	Nonpriority Creditor's Name	- When we the debt in some do		,
		When was the debt incurred?	2016-09	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	_		
0.4	No. 2- of			<b>AO 570 00</b>
24	Nonpriority Creditor's Name	Last 4 digits of account number	0820	\$2,573.00
	Attn: Bankruptcy PO Box 9500	When was the debt incurred?	2008-08	
	Wilkes Barre, PA 18773-9500  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		

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Deptoi	Daniels-Stephens, Labonna		Case number (it know)	
4.25	Navient	Last 4 digits of account number	0820	\$1,662.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	2008-08	
	Wilkes Barre, PA 18773-9500  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	report as priority claims  Debts to pension or profit-sharin	ration agreement or divorce that you did not	
4.26	Northside Community Fc	Last 4 digits of account number	0013	\$869.00
	Nonpriority Creditor's Name	When was the debt incurred?	2016-11-04	
	1011 W Lawrence Ave Chicago, IL 60640-5017  Number Street City State Zlp Code Who incurred the debt? Check one.  ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	report as priority claims  Debts to pension or profit-sharin	d claim: ration agreement or divorce that you did not	
4.27	Nu Way/Tinley Park Disposal  Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$115.00
	Nonphony Gradier Chamb	When was the debt incurred?	2012-05-24	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other, Specify	g promoti desire. Sirindi desire	
	<b>—</b> 100	Utner, Specity		

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1 Daniels-Stephens, LaDonna		Case number (f know)	
Performance Dental Care	Last 4 digits of account number	5617	\$251.00
Nonpriority Creditor's Name	When was the debt incurred?	2016-06-10	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
Yes	Other. Specify		
Readyrefresh by Nestle	Last 4 digits of account number	3596	\$65.00
Nonpriority Creditor's Name	When was the debt incurred?	2012-11-02	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
Yes	_		
Sprint	Last 4 digits of account number	7245	\$413.00
Nonpriority Creditor's Name	When was the debt incurred?	2015-01-21	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
Yes	Other Specify		
Yes	Other. Specify		

Debtor 1 Daniels-Stephens, LaDonna		red 03/22/17 12:46:43 Des 30 of 52 Case number (f know)	с маіп
4.31 The Center For Dental Excell	Last 4 digits of account numbe	er <u>3001</u>	\$363.00
Nonpriority Creditor's Name	When was the debt incurred?	2013-08-29	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the clair	m is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a se report as priority claims	paration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sha	ring plans, and other similar debts	
Yes	Other. Specify		
Part 3: List Others to Be Notified About a Del	at That You Already Listed		
5. Use this page only if you have others to be notified a	•	t you already listed in Ports 1 or 2. For example	if a collection agency
is trying to collect from you for a debt you owe to so have more than one creditor for any of the debts the notified for any debts in Parts 1 or 2, do not fill out of	omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection agency	here. Similarly, if you
Name and Address 2014 1 lh Borrower	On which entry in Part 1 or Part 2 did you Line <b>4.12</b> of (Check one):	ou list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Clair	ms
	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured 0546	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?	
Atg Credit	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claim	ms
1700 W Cortland St Ste 2 Chicago, IL 60622-1131		Part 2: Creditors with Nonpriority Unsecured	Claims
Sincago, in 00022-1131	Last 4 digits of account number	5313	
Name and Address	On which entry in Part 1 or Part 2 did y		
Bystrom Richard	Line <b>4.11</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claim	ns
	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured 5822	Claims
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?	
Caine & Weiner	Line 4.29 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claim	ns
21210 Erwin St		■ Part 2: Creditors with Nonpriority Unsecured	Claims
Woodland Hills, CA 91367-3714	Last 4 digits of account number	3596	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?	
Capital Acct	Line <b>4.28</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claim	
PO Box 140065 Nashville, TN 37214-0065		Part 2: Creditors with Nonpriority Unsecured	Claims
Nashville, 114 37214-0003	Last 4 digits of account number	5617	
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?	
Chrysler Fin Co LLC		☐ Part 1: Creditors with Priority Unsecured Claim	ms
	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims

Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address

**Collection Bureau of A** 

25954 Eden Landing Rd

Hayward, CA 94545-3816

Line  $\underline{\textbf{4.13}}$  of (Check one):

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

1504

■ Part 2: Creditors with Nonpriority Unsecured Claims

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Collection Professiona	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
723 1st St		■ Part 2: Creditors with Nonpriority Unsecured Claims
La Salle, IL 61301-2535	Last 4 digits of account number	7518
		7310
Name and Address	On which entry in Part 1 or Part 2 d	· •
Diversified Consultant	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
10550 Deerwood Park Blvd Jacksonville, FL 32256-0596		Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonvine, 1 L 32230-0330	Last 4 digits of account number	8973
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?
Diversified Consultant	Line 4.30 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
10550 Deerwood Park Blvd		■ Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville, FL 32256-0596	Last 4 digits of account number	7245
Name and Address	On which enter in Part 1 or Part 2 d	lid you liet the evisional available?
Enhanced Recovery Co L	On which entry in Part 1 or Part 2 d Line <b>4.7</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
8014 Bayberry Rd	Ellio 417 of (Orlock Orlo).	Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville, FL 32256-7412		• •
	Last 4 digits of account number	7364
Name and Address	On which entry in Part 1 or Part 2 d	
Fed Loan Serv	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 60610 Harrisburg, PA 17106-0610		■ Part 2: Creditors with Nonpriority Unsecured Claims
11a1115burg, FA 17 100-0010	Last 4 digits of account number	0002
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?
Fed Loan Serv	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 60610		Part 2: Creditors with Nonpriority Unsecured Claims
Harrisburg, PA 17106-0610	Last 4 digits of account number	0006
Name and Address	On which entry in Part 1 or Part 2 d	
Fed Loan Serv	Line <b>4.16</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 60610	Ellio 410 of Officer office.	Part 2: Creditors with Nonpriority Unsecured Claims
Harrisburg, PA 17106-0610		- Fait 2. Creditors with Nonpholity Offsecured Claims
	Last 4 digits of account number	0001
Name and Address	On which entry in Part 1 or Part 2 d	· _
Fed Loan Serv	Line <b>4.17</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 60610		Part 2: Creditors with Nonpriority Unsecured Claims
Harrisburg, PA 17106-0610	Last 4 digits of account number	0008
Name and Address	On which entry in Part 1 or Part 2 d	lid you list the original creditor?
Fed Loan Serv	Line 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 60610		Part 2: Creditors with Nonpriority Unsecured Claims
Harrisburg, PA 17106-0610	Last 4 digits of account number	0004
Name and Address Fed Loan Serv	On which entry in Part 1 or Part 2 d	, _
PO Box 60610	Line <b>4.19</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims
Harrisburg, PA 17106-0610		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	0005
Name and Address	On which entry in Part 1 or Part 2 d	· •
Fed Loan Serv	Line <u>4.20</u> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 60610		■ Part 2: Creditors with Nonpriority Unsecured Claims
Harrisburg, PA 17106-0610	Last 4 digits of account number	0007
Namo and Address	On which ontry in Part 1 or Part 2 d	

Official Form 106 E/F

On which entry in Part 1 or Part 2 did you list the original creditor?

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Debtor 1 Daniels-Stephens, LaDonna	Document Pay	Case number (if know)	
Fed Loan Serv PO Box 60610	Line <u>4.21</u> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
Harrisburg, PA 17106-0610	Last 4 digits of account number	0003	
Name and Address First Premier Bank 601 S Minnesota Ave	On which entry in Part 1 or Part 2 di Line 4.22 of (Check one):	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
Sioux Falls, SD 57104-4824	Last 4 digits of account number	6949	
Name and Address Hullett;ronhullett;ann	On which entry in Part 1 or Part 2 di Line 4.10 of (Check one):	id you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims 2404	
Name and Address I C System Inc	On which entry in Part 1 or Part 2 di Line 4.27 of (Check one):	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims	
PO Box 64378 Saint Paul, MN 55164-0378	Land divide of account account	Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	0001	
Name and Address Mage & Price	On which entry in Part 1 or Part 2 di Line 4.31 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
707 Lake Cook Rd Deerfield, IL 60015-5613	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims  3001	
Name and Address Mage & Price 707 Lake Cook Rd	On which entry in Part 1 or Part 2 di Line <b>4.4</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims	
Deerfield, IL 60015-5613	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims  6001	
Name and Address	On which entry in Part 1 or Part 2 di		
Midwest Recovery Syste 2747 W Clay St Ste A	Line 4.23 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims	
Saint Charles, MO 63301-2557	Last 4 digits of account number	7885	
Name and Address  Navient	On which entry in Part 1 or Part 2 di Line <b>4.24</b> of ( <i>Check one</i> ):	id you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 9500 Wilkes Barre, PA 18773-9500		Part 2: Creditors with Nonpriority Unsecured Claims	
Wilkes Daile, PA 10773-9500	Last 4 digits of account number	0820	
Name and Address  Navient	On which entry in Part 1 or Part 2 di	id you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 9500	Line 4.20 of (Oneok one).	Part 2: Creditors with Nonpriority Unsecured Claims	
Wilkes Barre, PA 18773-9500	Last 4 digits of account number	0820	
Name and Address	On which entry in Part 1 or Part 2 di	· ·	
Unknown Plaintiff	Line 4.1 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	0546	
Name and Address  Unknown Plaintiff	On which entry in Part 1 or Part 2 di Line <u><b>4.2</b></u> of ( <i>Check one</i> ):	id you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims	
	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims 1205	
Name and Address Unknown Plaintiff	On which entry in Part 1 or Part 2 di Line 4.3 of (Check one):	id you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims 1410	

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Debtor 1 Daniels-Stephens, LaDonna

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
T. (.)	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 13,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 13,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 107,738.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 107,738.00

Fill in this infor	mation to identify your	case:	nt 1 uge 0 = 01 32	
Debtor 1	LaDonna Daniels	s-Stephens Middle Name	Loot Nome	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISION	١
Case number				
(if known)				

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for
  example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and
  unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	City		State	ZIF Code	
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4	,				
2.7	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<del>_</del>
2.5					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_
	J.1.J			0000	

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		Docume	ent Page 35 o	I.52	
Fill in this in	formation to identify your o		ago oo o	. 02	
Debtor 1	LaDonna Daniels	-Stephens			
D.1.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTER	N DIVISION	
Case number	r				☐ Check if this is an amended filing
	Form 106H le H: Your Code	ebtors			12/15
are filing toge and number t	ether, both are equally resp	onsible for supplying co the left. Attach the Addit	orrect information. If mo	re space is needed, co	e as possible. If two married people opy the Additional Page, fill it out, ditional Pages, write your name and
1. Do yo	u have any codebtors? (If y	ou are filing a joint case, d	o not list either spouse as	a codebtor.	
■ No □ Yes					
	the last 8 years, have you a, Idaho, Louisiana, Nevada,				states and territories include Arizona,
_	o to line 3. Did your spouse, former spous	se, or legal equivalent live v	vith you at the time?		
line 2 ag	ain as a codebtor only if th chedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	you have listed the cr	with you. List the person shown in reditor on Schedule D (Official Form le E/F, or Schedule G to fill out
	dumn 1: Your codebtor ne, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt es that apply:
3.1 Na	me			_ ☐ Schedule D, line ☐ Schedule E/F, li ☐ Schedule G, line	ine
Nui City	mber Street	State	ZIP Code	_	
3.2 Nai	me			Schedule D, line Schedule E/F, line Schedule G, line	ine
Nui	mber Street	State	ZIP Code	_	

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FIII	in this information to identify your car	se:					1						
Del	Debtor 1 LaDonna Daniels-Stephens												
	otor 2 uuse, if filing)					_							
Uni	ted States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLING	DIS, EASTER	N								
	se number nown)		☐ An	Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:									
0	fficial Form 106l						MN	M / DD/ Y	YYYY	_			
S	chedule I: Your Inco	me						,, .				12/15	
sup spo atta	s complete and accurate as possil plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O	re married and not filin spouse is not filing wit	g jointly, and h you, do no	d your spous ot include info	e is orma	livir atior	ng with yo n about yo	u, includ our spou	de info	orma more	tion about you space is ne	our eded,	
1.	Fill in your employment information.		Debtor 1					Debtor 2 or non-filing spouse					
	If you have more than one job,	Employment status	Employed					■ Employed					
	attach a separate page with information about additional employers.			☐ Not employed					☐ Not employed				
		Occupation	Risk Ma	Risk Manager			Factory Laborer						
	Include part-time, seasonal, or self-employed work.	Employer's name	Advocate HealthCare				Teledyne Storm II						
	Occupation may include student or homemaker, if it applies.	y include student or <b>Employer's address</b> it applies.			2320 E 93rd St Chicago, IL 60617-3909				10221 Werch Dr Woodridge, IL 60517-4973				
How long employed the			nere?	ere? 5 years				3 years					
Par	t 2: Give Details About Mont	thly Income											
	mate monthly income as of the dat ss you are separated.	e you file this form. If y	ou have nothi	ng to report fo	r any	y line	e, write \$0 i	in the spa	ace. In	clude	e your non-filir	ng spouse	
-	u or your non-filing spouse have more ce, attach a separate sheet to this forn		oine the inform	nation for all e	mplo	oyers	s for that pe	erson on	the line	es be	elow. If you ne	ed more	
	·						For Debt	or 1			otor 2 or ng spouse		
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	5,0	71.26	\$_		2,418.32			
3.	Estimate and list monthly overtime pay.				3.	+\$		0.00	+\$		0.00		
4.	Calculate gross Income. Add line	2 + line 3.			4.	\$	5,071	1.26	\$		2,418.32		

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	Daniels-Stephens, LaDonna	_	Case	e number (if known)			
	Copy	y line 4 here	4.	For	7 Debtor 1 5,071.26	For Debto non-filing		
5.	l ist:	all payroll deductions:						
J.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$	1,311.28 0.00 0.00 0.00 539.78 0.00 0.00 0.00	\$ 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	502.06 0.00 145.28 0.00 0.00 0.00 0.00 0.00 0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,851.06	\$	647.34	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,220.20	\$	1,770.98	
8.	List a	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8c. 8d. 8e.	\$ _ \$ _	0.00 0.00 0.00	\$ \$ \$	0.00 0.00 0.00	
	8g.	Specify:  Pension or retirement income	— <sup>8f.</sup> 8g.	\$ \$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	· _		+ \$	0.00	
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,220.20 + \$_	1,770.98	<u>3</u> = \$	1,991.18
11.	Inclu other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your defineds or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not avoify:	ependen				. <b>+</b> \$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain					\$4 Combine monthly	
13.	Do y ■	No. Yes. Explain:	?					come

Official Form 106I Schedule I: Your Income page 2

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Fill i	in this information to identify your case:						
Deb	LaDonna Daniels-Stephens	_   _					
	ouse, if filling)	_   -	A supplement show expenses as of the	ring postpetition chapter 13 following date:			
Unite	ned States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		MM / DD / YYYY				
1	e numbernown)						
	fficial Form 106J						
Be a	chedule J: Your Expenses as complete and accurate as possible. If two married people are filing togetl brandion. If more space is needed, attach another sheet to this form. On the known). Answer every question.						
Part	t 1: Describe Your Household Is this a joint case?						
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?						
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate	Household of Debt	tor 2.				
2.	Do you have dependents? ☐ No						
		nt's relationship to or Debtor 2	Dependent's age	Does dependent live with you?			
	Do not state the dependents names.  Daught	er	20	□ No ■ Yes			
	Son		18	□ No ■ Yes □ No			
	Son		12	Yes			
0	Daught	er	9	□ No ■ Yes			
3.	Do your expenses include expenses of people other than yourself and your dependents?   ■ No □ Yes						
Esti	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless you are using senses as of a date after the bankruptcy is filed. If this is a supplemental Scholicable date.						
valu	lude expenses paid for with non-cash government assistance if you know thue of such assistance and have included it on <i>Schedule I: Your Income</i> ficial Form 106I.)	ne	Your exp	enses			
4.	The rental or home ownership expenses for your residence. Include first me payments and any rent for the ground or lot.	ortgage 4.	\$	1,900.00			
	If not included in line 4:						
	4a. Real estate taxes	4a.	\$	0.00			
	4b. Property, homeowner's, or renter's insurance	4b.		35.00			
	4c. Home maintenance, repair, and upkeep expenses	4c.	\$	0.00			
_	4d. Homeowner's association or condominium dues	4d.		0.00			
5.	Additional mortgage payments for your residence, such as home equity loar	ns 5.	\$	0.00			

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Debtor 1 Da	aniels-Stephens, LaDonna	Case num	ber (if known)	
. Utilities:				
6a. Ele	ectricity, heat, natural gas	6a.	\$	310.00
6b. W	ater, sewer, garbage collection	6b.	\$	140.00
6c. Te	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	510.00
	ther. Specify:	6d.		0.00
	d housekeeping supplies	— <sub>7.</sub>	·	550.00
	re and children's education costs	8.	\$	0.00
		9.	\$	
	g, laundry, and dry cleaning			75.00
	Il care products and services	10.		100.00
	and dental expenses	11.	\$	0.00
	ortation. Include gas, maintenance, bus or train fare.	12.	\$	460.00
	nclude car payments.	13.	·	
	nment, clubs, recreation, newspapers, magazines, and books			0.00
	ole contributions and religious donations	14.	\$	0.00
5. Insuranc				
	nclude insurance deducted from your pay or included in lines 4 or 20.  fe insurance	15a.	¢	0.00
				0.00
	ealth insurance	15b.	·	0.00
	ehicle insurance	15c.		367.00
	ther insurance. Specify:	15d.	\$	0.00
	Oo not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
	ent or lease payments:			
17a. Ca	ar payments for Vehicle 1	17a.	\$	0.00
17b. Ca	ar payments for Vehicle 2	17b.	\$	0.00
17c. Ot	ther. Specify:	17c.	\$	0.00
17d. Ot	ther. Specify:	17d.	\$	0.00
3. Your pa	yments of alimony, maintenance, and support that you did not report as			
	d from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	ayments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
Other re	al property expenses not included in lines 4 or 5 of this form or on Schedu	le I: You	r Income.	
20a. Mo	ortgages on other property	20a.	\$	0.00
20b. Re	eal estate taxes	20b.	\$	0.00
20c. Pr	roperty, homeowner's, or renter's insurance	20c.		0.00
	aintenance, repair, and upkeep expenses	20d.		0.00
	omeowner's association or condominium dues	20e.		0.00
1. <b>Other:</b> S		21.		
. Other: S	pecily.		+\$	0.00
2. Calculat	e your monthly expenses			
22a. Add	l lines 4 through 21.		\$	4.447.00
	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
			\$	4 4 4 7 00
220. Add	I line 22a and 22b. The result is your monthly expenses.		Φ	4,447.00
3. Calculat	e your monthly net income.			
	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,991.18
	opy your monthly expenses from line 22c above.	23b.		4,447.00
_00. 00		200.		7,771.00
23c Si	ubtract your monthly expenses from your monthly income.			
	ne result is your <i>monthly net income</i> .	23c.	\$	544.18
1. <b>Do you</b> 6	expect an increase or decrease in your expenses within the year after you find the year after you for your car loan within the year or do you expect your not to the terms of your mortgage?			ease or decrease because of a
	Fundain hans.			
☐ Yes.	Explain here:			

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Fill in this inform	nation to identify your o	case:						
Debtor 1	LaDonna Daniels	-Stephens						
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bar	nkruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS, EASTERN	DIVISION				
Case number					☐ Check if this is an amended filing			
Official Form								
Declarati	ion About a	ın Individua	I Debtor's So	chedules	12/1			
obtaining money years, or both. 18		connection with a bank			nent, concealing property, or , or imprisonment for up to 20			
Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?				
■ No								
☐ Yes. N	Yes. Name of person  Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)							
	ty of perjury, I declare t true and correct.	hat I have read the sum	mary and schedules filed	with this declaration	and			
LaDonr	onna Daniels-Steph na Daniels-Stephens e of Debtor 1		X Signature of	Debtor 2				

Date

Date March 22, 2017

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E	Lin dhin informa			_	_	_			
		ation to identify your							
De	btor 1	LaDonna Daniel First Name	S-Stepnens Middle Name	Last Na	me				
1	btor 2	First Name	Middle Name	Loot No					
` '	ouse if, filing)			Last Na					
Un	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, I	EASTERN DIV	ISION			
	nown)						_	Check if this is an mended filing	
St		of Financial	Affairs for Individ					4/16	
info (if k	ormation. If mo known). Answe	ore space is needed, r every question.	ole. If two married people are attach a separate sheet to the rital Status and Where You	his form. On t					
1.	What is your	current marital statu	s?						
	■ Married □ Not marr								
2.	During the la	st 3 years, have you	lived anywhere other than v	where you live	now?				
	□ No								
	_	all of the places you liv	red in the last 3 years. Do not	include where	you live now.				
	Debtor 1 Pri	or Address:	Dates Debtor 1 there	Dates Debtor 1 lived Debtor 2 Prior Address:				Dates Debtor 2 lived there	
	4129 Camb Country Cl	oridge Cir lub Hills, IL 60478	From-To: 4838 2013 to September 20		☐ Same as Debtor 1			☐ Same as Debtor 1 From-To:	
3. stat	tes and territorie  No	s include Arizona, Cal	er live with a spouse or leg ifornia, Idaho, Louisiana, Nev edule H: Your Codebtors (Offi	/ada, New Mex	kico, Puerto Rid				
Pa	rt 2 Explain	the Sources of You	rIncome						
4.	Fill in the total	amount of income yo	nployment or from operating u received from all jobs and a ave income that you receive to	all businesses,	including part-	time activities.	ous calend	ar years?	
	Yes. Fill	in the details.							
			Debtor 1			Debtor 2			
			Sources of income Check all that apply.	Gross inco (before dec exclusions)	ductions and	Sources of inco		Gross income (before deductions and exclusions)	
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips		\$10,758.64	☐ Wages, comr bonuses, tips	nissions,		
			☐ Operating a business			☐ Operating a b	usiness		

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Case number (if known) Document

Debtor 1 Daniels-Stephens, LaDonna

Debto		Debtor 1			Debtor 2	Debtor 2				
For last calendar year:  (January 1 to December 31, 2016)		Sources of income Check all that apply.		s income re deductions and sions)	Sources of inco		Gross income (before deductions and exclusions)			
		■ Wages, commissions bonuses, tips	S,	\$56,000.01	☐ Wages, com bonuses, tips	☐ Wages, commissions, bonuses, tips				
				☐ Operating a business	S		☐ Operating a	business		
		dar year be December		■ Wages, commissions bonuses, tips	S,	\$56,028.00	☐ Wages, com bonuses, tips	missions,		
				☐ Operating a business	S		☐ Operating a	business		
5.	Include incother publication you are fili	come regard ic benefit pa ng a joint ca	less of wheth yments; pens se and you ha	e during this year or the ter that income is taxable. Elions; rental income; interestave income that you receive me from each source separate.	xamples of or t; dividends; r d together, lis	ther income are alin money collected fror to tit only once under	n lawsuits; royalties; Debtor 1.			
	☐ Yes.	Fill in the de	etails.							
				Debtor 1			Debtor 2			
				Sources of income Describe below.	each	s income from source re deductions and sions)	Sources of inco	ome	Gross income (before deductions and exclusions)	
<b>Ра</b> 6.				Made Before You Filed f		су				
	□ No.	individual p	orimarily for a	Debtor 2 has primarily con personal, family, or househ	old purpose.	,		S.C. § 101(	8) as "incurred by an	
		During the No.	Go to line	ore you filed for bankruptcy,	did you pay a	any creditor a total o	f \$6,425° or more?			
		☐ Yes		<i>r</i> . each creditor to whom you <sub>ا</sub>	noid a total of	¢6 425* or more in	one or more novemer	ata and the t	atal amount you paid the	
			creditor. D payments t	o not include payments for o an attorney for this bankri t on 4/01/19 and every 3 year	domestic su uptcy case.	pport obligations, s	uch as child suppor	t and alimor		
	Yes.	Debtor 1	or Debtor 2 o	or both have primarily control you filed for bankruptcy,	nsumer debi	ts.		dotinont.		
		_	•		, , ,	,	,			
		■ No. □ Yes		7. each creditor to whom you p or domestic support obligat						
			this bankru	11		orma oupport and				
	Creditor	's Name and	d Address	Dates of pay	yment	Total amount paid	Amount you still owe	Was this	payment for	
7.	Insiders in which you	clude your re are an office	elatives; any ç er, director, pe	r bankruptcy, did you mal general partners; relatives o erson in control, or owner of prietor. 11 U.S.C. § 101. Inc	f any general f 20% or more	partners; partnershe of their voting secu	ips of which you are urities; and any mana	a general pa aging agent,	artner; corporations of including one for a	
	■ No □ Yes.	List all paym	ents to an ins	sider.						
	Insider's	Name and	Address	Dates of pay	yment	Total amount	Amount you	Reason fo	or this payment	

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Case number (if known) Document

Debtor 1 Daniels-Stephens, LaDonna

8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cosi			nents or transfer ar	ny property	on acc	ount of a deb	t that benefited an	
	No								
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dat	es of payment	Total amount paid	Amount still	you owe	Reason for I	this payment itor's name	
Pai	t 4: Identify Legal Actions, Repossession	ns, and	l Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury and contract disputes.								
	■ No □ Yes. Fill in the details.								
	Case title Case number	Nat	Status of the case						
<ul> <li>10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or lev Check all that apply and fill in the details below.</li> <li>No. Go to line 11.</li> <li>Yes. Fill in the information below.</li> </ul>						seized, or levied?			
	Creditor Name and Address	Dos	scribe the Property			Date		Value of the	
	oreator Name and Address	Explain what happened						property	
11.	<ul> <li>Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?</li> <li>No</li> <li>Yes. Fill in the details.</li> <li>Creditor Name and Address</li> <li>Describe the action the creditor took</li> <li>Date action was</li> </ul>								
						taken			
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a			ty in the possessio	on of an ass	signee f	or the benefit	of creditors, a	
	☐ Yes								
Pai	t 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	otcy, di	id you give any gifts	with a total value o	of more than	n \$600	per person?		
	Gifts with a total value of more than \$600 person	per	Describe the gifts			Dates the gi	you gave fts	Value	
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankrup  No  Yes. Fill in the details for each gift or continuous continu			or contributions w	rith a total v	alue of	more than \$6	600 to any charity?	
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)						you buted	Value	
Pai	t 6: List Certain Losses								

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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	or gambling?					
	No					
	Yes. Fill in the details.					
	how the loss occurred	nclude	be any insurance coverage for the loss the amount that insurance has paid. List not claims on line 33 of Schedule A/B: Pro	t pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankrupto consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition prep	parin	g a bankruptcy petition?			y to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any proper transferred	Date payment or transfer was made	Amount of payment	
	Senter Legal Services, Ltd. 22511 Jackson Ct # 2D Richton Park, IL 60471-2109		0.00		\$0.00	
	Within 1 year before you filed for bankruptopromised to help you deal with your creditopo not include any payment or transfer that you No  Yes. Fill in the details.	ors or	to make payments to your creditors?	ehalf pay or	transfer any propert	y to anyone who
	Person Who Was Paid Address		Description and value of any proper transferred	ty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your I Include both outright transfers and transfers m gifts and transfers that you have already listed No  Yes. Fill in the details.	<b>busine</b> ade as	ess or financial affairs? security (such as the granting of a securi			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you			para III OA		
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-present No  Yes. Fill in the details.			-settled trus	st or similar device of	which you are a
	Name of trust		Description and value of the propert	y transferre	ed	Date Transfer was made

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Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stora	age Units							
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No										
		Last 4 digits of account number	Type of accou	nt or	Date account was closed, sold, moved, or		ast balance before closing or transfer				
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, any	safe depo	transferred	itory	for securities,				
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe	the contents		Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?										
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City, State		the contents		Do you still have it?				
Par	t 9: Identify Property You Hold or Control for	r Someone Else									
23.	Do you hold or control any property that some someone.	eone else owns? Inclu	de any property	you borro	owed from, are storing	for, o	r hold in trust for				
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value				
Par	t 10: Give Details About Environmental Inform	mation									
or	the purpose of Part 10, the following definitions	s apply:									
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a controlling the cleanup of these substances, w	air, land, soil, surface									
	Site means any location, facility, or property as own, operate, or utilize it, including disposal si Hazardous material means anything an environ	ites.									
	material, pollutant, contaminant, or similar terr			, , ,							
Rep	ort all notices, releases, and proceedings that y	ou know about, regai	dless of when th	ey occurr	red.						
24.	Has any governmental unit notified you that yo	ou may be liable or po	tentially liable u	nder or in	violation of an environ	ment	tal law?				
	No										
	Yes. Fill in the details.	Covernmental	14	Francis:	annontal law if		Data of matter				
	Name of site Address (Number, Street, City, State and ZIP Code)	Address (Number, S ZIP Code)		know	onmental law, if you it		Date of notice				

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25.	Have	you notified any governmental unit of	any r	elease of hazardous material?						
	_	No Yes. Fill in the details.								
		ne of site ress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	ı	Environmental law, if you know it	Date of notice			
26.	Have	you been a party in any judicial or adn	ninist	rative proceeding under any enviro	onm	ental law? Include settlements and	d orders.			
		No Yes. Fill in the details.								
		e Title e Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Par	t 11:	Give Details About Your Business or	Conn	ections to Any Business						
27.		in 4 years before you filed for bankrupt  ☐ A sole proprietor or self-employed i  ☐ A member of a limited liability comp  ☐ A partner in a partnership	n a tra	ade, profession, or other activity, e	ithe	r full-time or part-time	usiness?			
		☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation									
		No. None of the above applies. Go to F	Part 12	2.						
		Yes. Check all that apply above and fill	in th	e details below for each business.						
		iness Name Iress	Des	scribe the nature of the business		Employer Identification number Do not include Social Security n	umber or ITIN.			
		ber, Street, City, State and ZIP Code)	Nar	ne of accountant or bookkeeper		Dates business existed				
28.		in 2 years before you filed for bankrupt tutions, creditors, or other parties.	cy, di	d you give a financial statement to	any	one about your business? Include	all financial			
	_	No Yes. Fill in the details below.								
		ne Iress ber, Street, City, State and ZIP Code)	Dat	e Issued						
Par	t 12:	Sign Below								
true bank	and o	od the answers on this <i>Statement of Fin</i> correct. I understand that making a falsey case can result in fines up to \$250,00 §§ 152, 1341, 1519, and 3571.	e stat	ement, concealing property, or obt	aini	ng money or property by fraud in				
Lal	Donn	onna Daniels-Stephens na Daniels-Stephens e of Debtor 1	_	Signature of Debtor 2						
Dat	e <u>N</u>	larch 22, 2017	_	Date						
Did y ■ N □ Y	lo	ttach additional pages to Your Stateme	nt of	Financial Affairs for Individuals Fili	ing i	for Bankruptcy (Official Form 107)	?			
■ N	lo .	ay or agree to pay someone who is not								
		ame of Person Attach the Bankru								
Offici	al Forr	m 107 Staten	nent o	f Financial Affairs for Individuals Filing	for I	Bankruptcy	page 6			

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B2030 (Form 2030) (12/15)

#### **United States Bankruptcy Court** Northern District of Illinois, Eastern Division

In re	Daniels-Stephens, LaDonna		Case No.					
	-	Debtor(s)	Chapter	13				
	DISCLOSURE OF CO	OMPENSATION OF ATTO	ORNEY FOR D	EBTOR				
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. compensation paid to me within one year before be rendered on behalf of the debtor(s) in contem	the filing of the petition in bankruptcy	y, or agreed to be paid	d to me, for services r				
	For legal services, I have agreed to accept		\$	1,500.00				
	Prior to the filing of this statement I have re			0.00				
	Balance Due		\$	1,500.00				
2.	The source of the compensation paid to me was:							
	☐ Debtor ☐ Other (specify):	Hyatt Prepaid Legal Services						
3.	The source of compensation to be paid to me is:							
	☐ Debtor ☐ Other (specify):	Hyatt Prepaid Legal Services						
4.	■ I have not agreed to share the above-disclose firm.	ed compensation with any other person	n unless they are mer	nbers and associates o	of my law			
	☐ I have agreed to share the above-disclosed copy of the agreement, together with a list of				law firm. A			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
1	a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, scheduc. Representation of the debtor at the meeting of d. [Other provisions as needed]	les, statement of affairs and plan whic	h may be required;	•	cruptey;			
<b>6.</b> 1	By agreement with the debtor(s), the above-disc	losed fee does not include the following	ng service:					
		CERTIFICATION						
	I certify that the foregoing is a complete stateme ankruptcy proceeding.	nt of any agreement or arrangement for	or payment to me for	representation of the	debtor(s) in			
IV	larch 22, 2017	/s/ April Senter						
D	ate	April Senter Signature of Attorna Senter Legal Ser			_			
		22511 Jackson C Richton Park, IL						
		senterlegal@gma	ail.com					
		Name of law firm						

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IN RE:		Case No.					
Daniels-Stephens, LaDonna		Chapter 13					
	Debtor(s)						
	VERIFICATION OF CREDITOR MATRIX						
		Number of Creditors23					
The above-named Debtor(s) hereby	verifies that the list of creditors is tr	rue and correct to the best of my (our) knowledge.					
Date: March 22, 2017	/s/ LaDonna Daniels-Stephens Debtor						
	Joint Debtor						

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622-1131

Caine & Weiner 21210 Erwin St Woodland Hills, CA 91367-3714

Capital Acct PO Box 140065 Nashville, TN 37214-0065

Collection Bureau of A 25954 Eden Landing Rd Hayward, CA 94545-3816

Collection Professiona 723 1st St La Salle, IL 61301-2535

Diversified Consultant 10550 Deerwood Park Blvd Jacksonville, FL 32256-0596

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256-7412 Exeter Finance Corp PO Box 166008 Irving, TX 75016-6008

Exeter Finance Corp PO Box 166097 Irving, TX 75016-6097

Fed Loan Serv PO Box 60610 Harrisburg, PA 17106-0610

Fed Loan Servicing PO Box 69184 Harrisburg, PA 17106-9184

First National Bank Attn: FNN Legal Dept 1620 Dodge Dt MSC CODE3290 Omaha, NE 68130

First Premier Bank 601 S Minneaplois Ave Dious FDalls, SD 57104

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104-4824 Fnb Omaha PO Box 3412 Omaha, NE 68103-0412

Hertg Accpt 1420 S Michigan St South Bend, IN 46613-2214

I C System Inc PO Box 64378 Saint Paul, MN 55164-0378

Internal Revenue Service ACS Support-Stop 813-G PO Box 145566 Cincinnati, OH 45250-5566

Mage & Price 707 Lake Cook Rd Deerfield, IL 60015-5613

Midwest Recovery Syste 2747 W Clay St Ste A Saint Charles, MO 63301-2557

Navient PO Box 9500 Wilkes Barre, PA 18773-9500 Navient Attn: Bankruptcy PO Box 9500 Wilkes Barre, PA 18773-9500

Northside Community Fc 1011 W Lawrence Ave Chicago, IL 60640-5017